



CLUB MEETING FORM

CLUB:		
CLUB ADVISOR:		EXT #
DATE OF MEETING:		LOCATION:
<i>Attendance</i>		
CLUB OFFICERS		OTHER MEMBERS
NAME	OFFICE	
	President	
	Vice President	
	Secretary	
	Treasurer	
	Student Senate Rep.	
OTHER MEMBERS		

IF THERE ARE NO SIGNATURES, PLEASE STATE REASON.

Return original to Student Activities in C109. Keep a copy for your records. Thank you.

MUST BE SUBMITTED AFTER EACH MEETING OR CLUB FUNDS/STATUS MAY BE JEOPARDIZED.